

Sponsorship Form

I would like to be recogni	ized as a sponsor:	
Sponsorship Levels		
☐ Presenting \$5,000	☐ Gold Heart \$2,500	□ Casino Table \$250
☐ Silver Lining \$1,000	☐ Bronze Hero \$500	
Additional Ways to Supp	port	
Before November 15 th :	Single ticket: x \$50	Group of 10: x \$500
After November 15 th :	Single ticket: x \$60	Group of 10: x \$600
Donation: \$	Auction Item:	Value: \$
Company Name:		Contact Name:
	Province:	
Phone:	Email:	
Signature:		Date:
into a sponsorship control For Childhood Cancer Fo the agreed upon sponso	act with the charity fundraiser which oundation. For the sponsorship dolur or recognition and in return fulfil the	(your business name) agrees to enter ch supports the West Coast Hearts of Gold lars the above named sponsor will receive e duties and meet the requirements listed
in full. The sponsor is to	make payment to West Coast Hear	I not begin until payment has been made ts of Gold For Childhood Cancer hat sponsorships are non-refundable.
Please submit your comp	oany logo to heartsofgold@telus.ne	et
PAYMENT OPTIONS ☐ Cheque (Payable to V	Vest Coast Hearts of Gold)	□e-transfer to heartsofgold@telus.net
If you have any question Email: heartsofgold@te	s for sponsorship opportunities, p lus.net Phone: 604-316-2	
Thank you for supr	porting the Hearts of Gold	Galal

West Coast Hearts of Gold For Childhood Cancer Foundation 46321 Hope River Rd. Chilliwack, BC V2P 3P4

604-316-2685 heartsofgold@telus.net www.heartsofgoldforkids.ca